

|   |   |                   |   |   |  |             |                                |  |
|---|---|-------------------|---|---|--|-------------|--------------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD   |   |                   |   |   | Application or Docket Number<br>09/653583  |             |                                |  |
| CLAIMS AS FILED - PART I  |   |                   |   |   |  |             |                                |  |
| (Column 1)  |   | (Column 2)        |   | SMALL ENTITY<br>TYPE <input type="checkbox"/> OR OTHER THAN<br>SMALL ENTITY |  |             |                                |  |
| FOR   |   | NUMBER FILED      |   | NUMBER EXTRA  |  | RATE FEE    |                                |  |
| BASIC FEE   |   | [REDACTED]        |   | [REDACTED]  |  | OR RATE FEE |                                |  |
| TOTAL CLAIMS  |   | 17 minus 20 = * 0 |   | [REDACTED]  |  | X\$ 9 = 0   |                                |  |
| INDEPENDENT CLAIMS  |   | 3 minus 3 = * 0   |   | [REDACTED]  |  | X = 0       |                                |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |                   |   |   | + = 0                                      |             | + = 0                          |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |                   |   |   | TOTAL                                      |             | TOTAL 140.0                    |  |
| 3/27/03 CLAIMS AS AMENDED - PART II<br>(Column 1) RCE (Column 2) (Column 3)   |   |                   |   |   | SMALL ENTITY OR OTHER THAN<br>SMALL ENTITY |             |                                |  |
| AMENDMENT A   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |   | PRESENT<br>EXTRA                           |             | RATE ADDI-<br>TIONAL<br>FEE    |  |
|   | Total * 14                                |                   | Minus ** 20                                 |   | = 0  |             | OR RATE ADDI-<br>TIONAL<br>FEE |  |
| Independent * 3   |   | Minus *** 3       |   | = 0   |  | X\$ 9 = 0   |                                |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                   |   |   | X = 0                                      |             | X\$ 18 = 0                     |  |
| 5/27/00   |   |                   |   |   | + = 0                                      |             | + = 0                          |  |
| (Column 1) (Column 2) (Column 3)  |   |                   |   |   | TOTAL ADDIT. FEE                           |             | TOTAL ADDIT. FEE               |  |
| AMENDMENT B   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |   | PRESENT<br>EXTRA                           |             | RATE ADDI-<br>TIONAL<br>FEE    |  |
|   | Total * 5                                 |                   | Minus ** 20                                 |   | = 0  |             | OR RATE ADDI-<br>TIONAL<br>FEE |  |
| Independent * 3   |   | Minus *** 3       |   | = 0   |  | X\$ 9 = 0   |                                |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                   |   |   | X = 0                                      |             | X\$ 18 = 0                     |  |
| (Column 1) (Column 2) (Column 3)  |   |                   |   |   | TOTAL ADDIT. FEE                           |             | TOTAL ADDIT. FEE               |  |
| AMENDMENT C   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |   | PRESENT<br>EXTRA                           |             | RATE ADDI-<br>TIONAL<br>FEE    |  |
|   | Total * 0                                 |                   | Minus ** 0                                  |   | = 0  |             | OR RATE ADDI-<br>TIONAL<br>FEE |  |
| Independent * 0   |   | Minus *** 0       |   | = 0   |  | X = 0       |                                |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                   |   |   | + = 0                                      |             | + = 0                          |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.<br>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."<br>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."<br>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                   |   |   | TOTAL ADDIT. FEE                           |             | TOTAL ADDIT. FEE               |  |